

**STATE OF NEVADA
DEPARTMENT OF AGRICULTURE
DIVISION OF LIVESTOCK IDENTIFICATION
ELKO, NEVADA**

APPLICATION FOR LIVESTOCK DEALER'S LICENSE

To the Department of Agriculture, State of Nevada:

The undersigned hereby makes the statements contained on this application for the purpose of obtaining a license to conduct the business of a dealer in farm products or livestock for a period of one year from _____, 20 ____, pursuant to the provisions of Chapter 576, Nevada Revised Statutes.

SECTION I

1. Full name of applicant _____
2. State whether an individual, partnership, exchange, association or corporation _____
(See section II.)
3. Principal business address in Nevada _____
4. Principal business address outside of Nevada _____
5. Address for each of 3 past years, if different from present address _____

6. Class or classes of farm products or livestock to be handled and counties in which business will operate _____
7. Name, address and description of business activity of all employment during the 3 years prior to making this application _____

8. Description of business activities not included in Paragraph 7 during the 3 years prior to making this application _____

9. Have you or any member of a partnership, exchange, association or corporation have been arrested for anything other than a traffic violation, punishable by a fine of \$25 or less; if so, when and where, the nature of the crime charged, the disposition of the charge, the title and address of the police officials having custody of the record of the arrest, and the names and locations of all the courts before which any proceedings in connection with arrest took place:

10. Have you or any member of a partnership, exchange, association or corporation ever been a party in a civil suit; if so, the nature of the suit, whether the party was the plaintiff or the defendant, the disposition of the suit, and, if the applicant was the defendant and lost, whether there is a judgment or any portion thereof which remains unpaid:

11. Name and address of person other than the Executive Director, authorized to accept summons:

12. Packers and Stockyards Act registration number _____

13. Name of bonding company _____

14. Bond number _____

15. Amount of bond _____

SECTION II

INDIVIDUALS

Age _____ How many years engaged in the livestock or farm produce business? _____

Are any assets of your business held as community property? _____

Name of other party _____

SECTION III

FINANCIAL STATEMENT

As of closing of business _____, 20 _____.

ASSETS		LIABILITIES, CAPITAL, NET WORTH	
CURRENT ASSETS:		CURRENT LIABILITIES:	
Cash on hand	\$ _____	Accounts payable	
Cash in bank	_____	(includes \$ _____ past due)	\$ _____
Name of bank _____		Notes payable to banks	_____
Accounts receivable	_____	Notes payable to others	_____
Less:		Chattel mortgages and contracts payable	_____
Allowance for past due accounts	_____	Accrued liabilities	_____
Notes receivable	_____	(interest, wages, taxes, etc.)	_____
Less:		Other current liabilities (describe)	_____
Allowance for past due notes	_____		
Inventory of merchandise	_____	TOTAL CURRENT LIABILITIES	\$ _____
Other current assets (describe)	_____		
		OTHER LIABILITIES:	
TOTAL CURRENT ASSETS	\$ _____	Mortgages or liens on real estate	_____
		Long – term notes or bonds payable	_____
OTHER ASSETS		Other liabilities (describe)	_____
Real Estate	\$ _____		
Buildings	_____	TOTAL OTHER LIABILITIES	\$ _____
Less: Depreciation	_____		
Machinery and fixtures	_____	TOTAL LIABILITIES	\$ _____
Less: Depreciation	_____	CAPITAL (If incorporated)	\$ _____
Automobiles and trucks	_____	Capital stock outstanding	_____
Less: Depreciation	_____	Surplus (or deficit)	_____
Inventory of supplies	_____		
Other assets (describe)	_____	TOTAL CAPITAL AND SURPLUS	\$ _____
TOTAL OTHER ASSETS	\$ _____	NET WORTH (if incorporated)	\$ _____
		Total liabilities and capital (corporation)	_____
TOTAL ASSETS	\$ _____	or	
		Total liabilities and net worth (individuals	
		And partnership	\$ _____

The undersigned certifies as to the accuracy of the foregoing statements and that the financial statement gives a full, true and complete statement of the financial condition of the applicant as of the date stated.

Date _____ Signature of applicant _____

Should you desire to operate as a COMMISSION MERCHANT or BROKER, as defined in the law, you should make separate application for the proper license.

Make checks payable to **Department of Agriculture** and mail to:

**NEVADA DEPT. OF AGRICULTURE
DIV. OF LIVESTOCK IDENTIFICATION
1351 ELM STREET
ELKO, NEVADA 89801**

Do you have an interest in any other business? _____ If "Yes," explain _____

Have you filed Homestead? _____

PARTNERSHIPS

Date of partnership organization _____ Limited or general? _____

Names of partners	Address	Original investment	Present investment
_____	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____

CORPORATIONS

Names of officers:

President _____ Vice President _____

Secretary _____ Treasurer _____

In what state incorporated? _____ Date _____

Capital stock authorized? _____ Shares. Par value \$ _____

Capital stock outstanding _____ Shares.

Capital paid in cash \$ _____

Capital paid in other than cash (describe) \$ _____

Names of persons holding or controlling 25 percent or more of capital stock of the corporation:

FOREIGN CORPORATION

Date of registration with Secretary of State, State of Nevada _____, 20 ____.

Name and address of resident agent _____